DECLARATION AND POWER OF ATTORNEY FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)

As a below named inventor, I hereby declare that: My residence, mailing address, and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

this system"							
the application of which							
X is attached hereto	OR	☐ was file	d on				
			tates Application Number	or PCT Internatio	nal Application		
		(Confirmati), and was ame oplicable).	nded on		
I hereby state that I have reviewed and by any amendment specifically referred	understand the co	ntents of the ab	ove identified application,	including the cla	nims, as amende		
I acknowledge the duty to disclose continuation-in-part application(s), mat the national or PCT international filing	erial information v	which became a	vailable between the filing	in 37 CFR 1.5 g date of the prio	6, including for application and		
I hereby claim foreign priority under 35 breeder's rights certificate(s), or 365(a) United States of America, listed below inventor's or plant breeder's rights ceapplication on which priority is claimed	of any PCT inten and have also idu rtificate(s), or any	national applica entified below,	tion(s) which designated a by checking the box, any	t least one count foreign applicati	ry other than the		
Prior Application Number(5)	Counti	ry	Filing Date	Priority Yes	Priority Claimed Yes No		
TO 0000 1000101		•	9				
TO2003A000184	ITAL	Y	12 March 2003	X			
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I hereby claim benefit under 35 United	States Code §119(e		States provisional applicat		.		
I hereby claim benefit under 35 United					.		
I hereby claim benefit under 35 United	States Code §119(elication Number(s) [F1] d States Code §12 tates, listed below attes or PCT Internating my duty to di	e) of any United O of any United and, insofar as attional applicati	States provisional applicate Filing Date [F2] d States application(s) or the subject matter of each on in the manner provided ormation material to the p	sion(s) listed belo \$365(c) of any P of the claims of the by the first parage	w. CT Internationa his application is traph of Title 35 is application as		

that all correspondence about the application be addressed to the address filed under the same USPTO Customer Number.

PATENT TRADEMARK OFFICE

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Attorney Docket No.:

Client Ref. No.

Attorney Docket No.: Client ref. No.

NAME OF SOLE OR FIRST INVI	ENTOR:	· · · · · · · · · · · · · · · · · · ·					
Given Name							
(first and middle [if any]) Alberto Family Name or Surname MORELLI							
Inventor's Signature	Willes		Date	4 March 2004			
Residence: City Torino	State	Country ITALY		Citizenship ITALIAN			
Mailing Address: Strada Valsalice 76							
City Torino	State	Zip 10131		Country ITALY			
NAME OF SECOND INVENTOR:							
Given Name (first and middle [if any])	Family Name or Surname						
Inventor's Signature	T	Date					
Residence: City	State	Country		Citizenship			
Mailing Address:							
City	State	Zip		Country			
NAME OF THIRD INVENTOR:							
iven Name irst and middle [if any]) Family Name or Surname		ne.					
Inventor's Signature			Date				
Residence: City	State	Country		Citizenship			
Mailing Address:							
City	State	Zip		Country			
NAME OF FOURTH INVENTOR:							
Given Name (first and middle [if any]) Family Name or Surname							
Inventor's Signature		Date					
Residence: City	State	Country		Citizenship			
Mailing Address:							
City	State	Zip		Country			
NAME OF FIFTH INVENTOR:				Country			
Given Name				•			
(first and middle [if any]) Family Name or S		Family Name or Surname	name				
Inventor's Signature		Date					
Residence: City	State	Country		Citizenship			
Mailing Address:			·····				
City	State	Zip		Country			
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